Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

| Effective January 1, 2003   |  |   |                                    |   |                            |                                       |            |                   |                                       |           |                            |                        |
|---|--|---|------------------------------------|---|----------------------------|---------------------------------------|------------|-------------------|---------------------------------------|-----------|----------------------------|------------------------|
|   |  | CLAIMS AS                                 | S FILED - PART I<br>(Column 1)     |   | (Column 2)                 |                                       |            | SMALL ENTITY TYPE |                                       | o e<br>OR | OTHER THAN<br>SMALL ENTITY |                        |
| TOTAL CLAIMS  |  |   | <i>\P</i>                          |   |                            |                                       | Г          | RATE              | FEE                                   | ] [       | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED                       |   | NUMBER EXTRA               |                                       | В          | ASIC FEE          | 375.00                                | OR        | BASIC FEE                  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | / minus 20=                        |   | *                          |                                       |            | X\$ 9=            |                                       | OR        | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |  |   | / minus 3 =                        |   | *                          |                                       |            | X42=              |                                       | OR        | X84=                       |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM P                              | RESENT                             |   |                            |                                       |            | +140=             |                                       | 1         | +280=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column                |  |   |                                    |   |                            | olumn 2                               | L.         | TOTAL             |                                       | OR<br>OR  | TOTAL                      | $() \cap$              |
| CLAIMS AS AMENDED - PART II   |  |   |                                    |   |                            |                                       |            | IOIAL             |                                       | UH        | OTHER                      | THAN                   |
|   |  | (Column 1)                                |                                    | (Colur                                  | mn 2)                      | (Column 3)                            |            | SMALL ENTITY      |                                       | OR        | SMALL ENTITY               |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY               | PRESENT<br>EXTRA                      |            | RATE              | ADDI-<br>TIONAL<br>FEE                |           | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                              | **                                      | ····                       | =                                     |            | X\$ 9=            |                                       | OR        | X\$18=                     |                        |
|   | Independent                                    | *   | Minus                              | ***                                     | 5 OL A 13 A                |                                       |            | X42=              |                                       | OR        | X84=                       |                        |
| <u> </u>  | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEF                        | ENDEN                                   | CLAIM                      |                                       | <u>ا</u> ا | +140=             |                                       | OR-       | +280=                      | п                      |
|   |  |   |                                    |   |                            |                                       | , L        | TOTAL             |                                       |           | TOTAL<br>ADDIT. FEE        |                        |
| d"  | •  | (Column 1)                                |                                    | (Colur                                  | mn 2)                      | (Column 3)                            | AD         | DIT. FEE          |                                       |           | AUDII. FEE                 | ,                      |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>OUSLY               | PRESENT<br>EXTRA                      |            | RATE              | ADDI-<br>TIONAL<br>FEE                | ,         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                              | **                                      |                            | =                                     | ]   :      | X\$ 9=            |                                       | OR        | X\$18=                     |                        |
|   | Independent                                    | *<br>NTATION OF M                         | Minus                              | ***                                     | CL AIAA                    | =                                     | ↓ [        | X42=              | !                                     | OR        | X84=                       |                        |
| <u> </u>  | TINOT PHESE                                    |   | J   _                              | +140=                                   |                            | OR                                    | +280=      |                   |                                       |           |                            |                        |
|   |  |   |                                    |   |                            |                                       | L_         | TOTAL             |                                       | OR        | TOTAL                      |                        |
|   |  | AD  | DIT. FEE                           |   | ,                          | ADDIT. FEE                            |            |                   |                                       |           |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | (Colur<br>HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY       | (Column 3) PRESENT EXTRA              |            | RATÉ              | ADDI-<br>TIONAL<br>FEE                |           | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                              | **                                      |                            | =                                     | ] [        | X\$ 9=            |                                       | OR        | X\$18=                     |                        |
| <b>AME</b>  | Independent                                    | *   | Minus                              | ***                                     | -                          | =                                     | ╽┞         | X42=              | · · · · · · · · · · · · · · · · · · · | OR        | X84=                       |                        |
| Ļ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                    |   |                            |                                       | J ├─       |                   | *                                     |           |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                                    |   |                            |                                       |            |                   |                                       | OR        | +280=                      |                        |
| **  | If the "Highest Nu<br>If the "Highest Nu       | mber Previously P<br>mber Previously F    | aid For" IN THI<br>aid For" IN THI | S SPACE I<br>S SPACE                    | is less tha<br>is less tha | in 20, enter "20.<br>in 3, enter "3." | 70         | TOTAL<br>DIT. FEE |                                       | -         | TOTAL<br>ADDIT. FEE        |                        |
|   | The "Highest Num                               | ther Previously Pa                        | id For" (Total or                  | Independ                                | ant) is the                | highest number                        | or found   | l in the and      | ropriate bo                           | v in co   | lumn t                     |                        |

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